

TO REMAIN ON TOP OF CIRCULATED ITEM AT ALL TIMES

FOR ACTION BY (Check one)

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USDA-FmHA
Form FmHA 2006-18
(8-85)

AFMS
AUTOMATED SYSTEMS
REQUEST FOR APPROVAL OF
DOCUMENTATION AND SOFTWARE

1. NUMBER AND/OR TITLE OF FORM/AUTOMATED
SYSTEM ISSUANCE

2. DESCRIPTION OF APPLICATION (Brief statement of significance)

3. INSTRUCTION/FORM CHANGE NEEDED? (Check appropriate box) ☐ YES ☐ NO IF "YES", IDENTIFY
INSTRUCTION(S)/FORM(S).

OFFICIALS SIGNING BELOW CERTIFY AS FOLLOWS: The proposed documentation for automation meets the necessary program requirements and is acceptable for programming.

4. PREPARATION

| | | | | | |
|-----------|------|------|-------|-----------------|------|
| Initiator | Date | Unit | Phone | Unit Supervisor | Date |
|-----------|------|------|-------|-----------------|------|

5. CLEARANCES (FOR PROGRAMMING AUTOMATION) SEE REVERSE FOR FINAL APPROVAL

| UNIT | SIGNATURE | DATE | UNIT | SIGNATURE | DATE |
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| 6. DIRECTIVES MANAGEMENT BRANCH | Date | Initials |
|---------------------------------------|------|----------|

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| 7. EST. COST AND STAFF DAYS | Approval for Software Development (Name and Title) | Date |
| \$ | Days | |

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|---|------|----------|
| 8. DATE FORWARDED FOR AUTOMATION SERVICES | Date | Initials |
|---|------|----------|

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| 9. I CERTIFY THAT THE SOFTWARE HAS BEEN PROPERLY TESTED AND IS CONSISTENT WITH THE DOCUMENTATION. | Signature | Date |
|---|-----------|------|

10. USER ACCEPTANCE STATEMENT: *Officials signing below certify that they have reviewed the system and application documentation and the software appears to produce the results intended and is consistent with program regulations and policy.*

SOFTWARE IS READY FOR ☐ IMPLEMENTATION (OR) ☐ PROTOTYPE TESTING IN THE FIELD.

11. CLEARANCES FOR IMPLEMENTATION OR PROTOTYPE TESTING (See above)

| UNIT | SIGNATURE | DATE | UNIT | SIGNATURE | DATE |
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| 12. DIRECTIVES MANAGEMENT BRANCH | Date | Initials |
| 13. FINAL APPROVAL | Signature and Title | Date |

14. AFTER APPROVAL RETURN TO ☐ DIRECTIVES MANAGEMENT BRANCH

15. FOR RELEASE: Software ID Number _____ PN No. _____ Date _____ Distribution _____